

REPORTS INVENTORY						CONTROL NO. <i>DDS/OC-045</i>	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.) Quarterly Financial Statements (Senior Officers of Their Financial Interests)						2. TYPE OF REPORT 1 STATISTICAL 1 NARRATIVE 1 MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL	
		LOGISTICS		SECURITY		OTHER (specify)	
		MEDICAL		FINANCE		1 COMMUNICATIONS	
4. NO. OF COPIES PREPARED 2		5. FREQUENCY (weekly, monthly, quarterly, etc.) Quarterly				6. DISTRIBUTION (No. of components not number of copies) 1	
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <input type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input checked="" type="checkbox"/> NO				9. DIRECTIVE AUTHORITY REQUIRING REPORT DCO	
10. PREPARING COMPONENT (include lowest level contributing information to report) OC-0				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR
GS 8-17	Average GS-15 13.31		20 min		4.47	4	4.47 17.88
B. COSTS OF COMPUTER PRODUCED REPORTS							
8 TOTAL COSTS PER YEAR							
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. By direction.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS MAN-HOURS DOLLARS STAT	
16. DATE OF INVENTORY 6 Oct 70		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100090137-7					18. EXTENSION